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APPLICANTS

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**** CONTINUING DATA *******

This application is a 371 of PCT/US03/23839 07/30/2003 which claims benefit of 60/421,024 10/24/2002

**** FOREIGN APPLICATIONS *******

UNITED STATES OF AMERICA 10/254924 09/25/2002

CRM
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Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY NJ	SHEETS DRAWING 22	TOTAL CLAIMS 28	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after				
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials				

ADDRESS

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TITLE

Single use syringe for two stroke procedures

FILING FEE RECEIVED 1300	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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